



## QUOTA SHARE HOLDER: IDENTIFICATION OF OWNERSHIP INTEREST

U.S. Dept. of Commerce/NOAA  
National Marine Fisheries Service  
Restricted Access Management  
P.O. Box 21668  
Juneau, AK 99802-1668



Quota Share Holder:

### BLOCK A - IDENTIFICATION OF QUOTA SHARE HOLDER

1. Is this business a publicly held corporation?    ☐ Yes    ☐ No
- 2.a. Is this a corporation or partnership?    ☐ Yes    ☐ No  
     b. If yes, is this corporation or partnership still active?    ☐ Yes    ☐ No
3. Is this an estate that has been probated?    ☐ Yes    ☐ No  
     If yes, on what date was probate finalized: \_\_\_\_\_

### BLOCK B - IDENTIFICATION OF SHAREHOLDERS, PARTNERS, JOINT VENTURERS, SUCCESSOR-IN-INTERESTS

NOTE: IF OWNERSHIP CONSISTS OF SEPARATE/ADDITIONAL CORPORATIONS OR PARTNERSHIPS THE INDIVIDUAL OWNERS OF THOSE ENTITIES AND THE PERCENTAGE OF INTEREST THOSE INDIVIDUALS HOLD IN THEIR RESPECTIVE CORPORATIONS OR PARTNERSHIPS MUST ALSO BE LISTED.

1. NAME (Print or Type)	2. ID (SSN or IFQ ID or Tax ID)	3. Percent (%) of Interest Held
TOTAL OWNERSHIP:		100 %

4. Do these ownership percentages represent the addition of any new owners since Quota Share was initially issued?    Yes ☐    No ☐

### BLOCK C - CERTIFICATION

Under penalty of perjury, I declare that I have examined this form, and to the best of my knowledge and belief, the information I have presented here is true, correct and complete.

1. Signature	2. Date
3. Printed Name	4. Title
5. Signature of Notary Public	6. Affix Notary Stamp or Seal Below
7. Commission Expires	



## INSTRUCTIONS

### Quota Share Holder: Identification of Ownership Interest

This form must be submitted by corporations, partnerships, and other non-individual entities who hold Quota Share (QS) under the Pacific halibut and sablefish Individual Fishing Quota (IFQ) program (50 CFR Part 679). Please type, or print legibly in ink; you may photocopy and attach additional sheets as necessary. Please sign in ink, have your signature notarized, retain a copy for your records, and mail the completed form to: **NMFS Alaska Region, Restricted Access Management (RAM), P.O. Box 21668, Juneau, AK 99802-1668**. For information, contact RAM at 800-304-4846 or 907-586-7202.

### GENERAL INFORMATION

The information requested herein is needed by RAM to determine compliance with two IFQ program requirements, including:

- 1) **Limitations On Use of QS and IFQ.** This information is needed to determine if persons who hold QS have exceeded their allowable use limits under the "individually and collectively" language set out in the IFQ regulations at 50 CFR 679.42(e) and (f); and,
- 2) **Changes in corporations or partnerships.** This information is also needed to determine if a Corporation or Partnership has changed. Under Sec. 679.42(j)(1) - (4), upon a "change" (i.e., the addition of a new member) to a corporation or partnership that holds catcher vessel QS, the entity may no longer hire a master to fish the IFQ resulting from the QS it holds; further, such an entity must notify NMFS of the change within 15 days of its effective date and must then transfer its QS to a qualified individual.

### SPECIFIC INSTRUCTIONS

#### BLOCK A - IDENTIFICATION OF QUOTA SHARE HOLDER

1. Indicate if the Quota Share holder is a publicly held corporation. If yes, sign the certification in Block C and return the form to RAM.
2. (a) Indicate if this is a corporation or partnership.  
(b) Indicate if the corporation or partnership is still active. If yes, go to Block "B". If no, sign the certification in Block C and return the form to RAM.
3. If the non-individual Quota Share holder is an estate and all estate matters with regard to the disposition of the assets, including Quota Share have been finalized you must answer "YES". Please provide the date the estate was settled.

#### BLOCK B - IDENTIFICATION OF MEMBERS

1. List the names of members. If a member is itself a corporation, partnership, or other such entity, you must also list the owners of that member at this time.
2. Enter the Social Security number (SSN), IFQ Identification number, or Tax Identification number of each member.

**Privacy Act Statement:** Federal regulations (at 50 CFR Part 679) authorize collection of this information. This information is used to verify the identity of the applicant(s) and to accurately retrieve confidential records related to federal commercial fishery permits. Where the requested information is a Social Security Number (SSN), disclosure is voluntary; in the event it is not provided, NMFS will assign a unique code that will identify the records.

3. Enter the percentage of ownership interest that each constituent member holds; for example, if there are three equal owners, enter "33-1/3" for each. The total interest of all members should equal 100 percent.
4. If any of the owners listed have been added since Quota Shares was issued you must answer "yes"

**BLOCK C - CERTIFICATION**

- 1-3. Sign and date the application in the presence of Notary Public, and print your name.
4. Authorized representatives must submit proof of authorization from QS owner and state title.
- 5-7. To be completed by a Notary Public, not the person submitting this application.

**PUBLIC REPORTING BURDEN STATEMENT**

Public reporting burden for this collection of information is estimated to average [0.2 hours] per response, including the time for reviewing the instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Assistant Regional Administrator, Sustainable Fisheries Division, NOAA National Marine Fisheries Service, P.O. Box 21668, Juneau, AK 99802.

**ADDITIONAL INFORMATION**

Before completing this form please note the following: 1) Notwithstanding any other provision of law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number; 2) This information is mandatory and is required to manage commercial fishing efforts under 50 CFR part 679 and under section 402(a) of the Magnuson-Stevens Act (16 U.S.C. 1801, et seq.); 3) Responses to this information request are confidential under section 402(b) of the Magnuson-Stevens Act (16 U.S.C. 1801, et seq.). They are also confidential under NOAA Administrative Order 216-100, which sets forth procedures to protect confidentiality of fishery statistics. These procedures have been implemented under the NMFS Operations Manual entitled, "Data Security Handbook for the Northwest-Alaska Region National Marine Fisheries Service."